PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

(703) 746-4000

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks I through 4 should be completed where appropriate. All further correspondence including the Patent, advance orders and politication of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Legibly mark-up with any corre

7590

03/29/2004

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Jeffrey G Sheldon Sheldon & Mark Mak, LLP 225 South Lake Avenue 9th Floor Pasadena, CA 91101

10/060.751



Note: A certificate of mailing can only be used for domestic mailings of the Fee(a) Transmittel. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission
I hereby certify that this Fee(s) Transmittal is being deposited with the United
States Postal Service with sufficient postage for first class mail in an envelope
addressed to the Mail Stop ISSUE FEE address above, or being facsimile
transmitted to the USPTO, on the date indicated below.

(Depositor's same) le Dallas (Signature) (Date

CONFIRMATION NO. ATTORNEY DOCKET NO. PIRST NAMED INVENTOR APPLICATION NO. FILING DATE 7055 2021-045 Juck D. Mc Neal 01/30/2002

OF BURNITION, CAMBI BILEVEL BETECTION SYSTEM

			5	PESI AVAII	LABLE COPY	•	
APPLN. TYPE	SMALL ENTITY	ISSUE PEE		PUBLICATION FEE	TOTAL FEE(S) DUE	TOTAL FEE(S) DUE DATE DUE	
nonprovisional	NO	\$1330		\$300	\$1630	06/29/2004	
EXAMINER		ART UNIT		CLASS-SUBCLASS			
COURSON, TANIA C		2859		250-34110Q			
 Change of correspondence address or indication of "Fee Address" (3 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custom Number is required. 			names of up to 3 registered patent attorneys or agents OR, elternatively, (2) the name of a single firm (having as a member a registered attorneys or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.				
3. ASSIGNEE NAME ANI PLEASE NOTE: Unless been previously submin (A) NAME OF ASSIGN		ow, no assignee de ubmitted under sep	ata will appear o	rint or type) n the patons. Inclusion of npletion of this form is N (CITY and STATE OR C	f assignee data is only appropri OT a substitute for filing an ass COUNTRY)	ate when an assignment ha ignment.	
	2.1	46	inted on the pate. Payment of Fee A check in the	e amount of the fec(s) is redit card. Form PTO-20			
	ested to apply the Issue Fee a	The second secon			d issue fee to the application ide		
other than the applicant;	nd Publication Fee (if require a registered attorney or age ecords of the United States Prattion is required by 37 CFR; by the public which is to five governed by 35 U.S.C. I uses to complete, including gram to the USPIO. Time with the amount of time you this burden, should be sent Office, U.S. Department SEND FEES OR COMPLET for Patenta, Alexandria, Vir	ent; or the assign tent and Trademar	k Office.	,	AWONDAF2 00000074 02160 1330.00 DA 300.00 DA 12.00 DA	60 10060751	